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ABSTRACT

This study examined the involvement of special education teachers with school-linked services (SLS) programs at their California schools. Telephone interviews were conducted with 25 resource and 8 special day teachers at 33 Healthy Start elementary schools, as well as from focus groups conducted with special education teachers at 2 case-study Healthy Start elementary schools. Findings indicated that teachers were aware of available services and referred students and their families to the programs. They knew the SLS program staff and many had used SLS staff expertise. Teachers who had been at their schools longer had forged stronger linkages with the school's SLS program. Special day classroom teachers reported a stronger relationship with their SLS program than did resource teachers. Special day teachers were more likely to refer students and their families to the program and include SLS staff in Individualized Education Program (IEP) meetings. Overall, special education teachers felt that the barriers to using the SLS program for students with disabilities were the same as those experienced by all students. Negative findings included the infrequent involvement of SLS staff in IEP meetings, lack of feedback to teachers after referral to an SLS program, and lack of availability of some needed services. Results are summarized by the six specific questions that guided the research. (DB)

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Special Education Teachers: Their Link to School-Linked Services

Overview

School-linked services (SLS) have emerged as a response to the needs of an increasing number of children who are struggling with multiple problems—poor physical or mental health, inadequate nutrition, substance abuse, family dysfunction—that affect their educational performance. Numerous communities throughout the country are attempting to address these needs through integrated school-linked health and social services. The premise for this type of reform is that schools cannot succeed at educating students as long as students' basic needs are not met. However, it has also been argued that meeting students' basic needs without gaining teacher support and involvement will result in ineffective "add-on" programs that do little to affect students' social conditions or educational outcomes (Jehl & Kirst, 1992; Wehlage, Smith, & Lipman, 1993). If teachers are not active members of the "link", not being aware of available services for their students and families, or if they do not receive feedback about the students they have referred for services, then how can they facilitate or support school-linked services?

The involvement of teachers in school-linked service reforms is important for all students, but especially for those with special needs. For many of the nearly 5 million children in America who receive special education services, their need for special education is only one of a multitude of factors that place them at risk for poor academic and social outcomes. Children with disabilities are disproportionately poor, more likely to be members of minority groups, more likely to live in single-parent families, and more likely to live in families whose head of household is not a high school graduate than are children in the general population (Wagner, Blackorby, Cameto, Hebbeler, & Newman, 1993). Children with disabilities are also more likely to be victims of abuse or neglect (Crosse, Kaye, & Ratnofsky, 1993). Given that students with disabilities come disproportionately from families with multiple needs, integrating several services at the school holds particular promise for improving outcomes for these children. Whereas at least a little is known about the effects of school-linked services for the general population, almost nothing is known about the involvement and impacts for students with disabilities and their teachers. Special education has been criticized for being a separate system apart from the regular education system (Gartner & Lipsky, 1987; Wang, Reynolds, &

Walberg, 1988). Will special educators remain apart from school-linked programs? Without teacher support and involvement even comprehensive strategies will be ineffective, with little impact on student educational outcomes.

This paper examines the involvement of special education teachers in the school-linked services program at their schools. These teachers teach in schools throughout California that were in their final year of a 3-year Healthy Start grant funded through California's Healthy Start school-linked services initiative to implement comprehensive school-linked services programs. Data were collected in the spring of 1996, from telephone interviews with 25 resource and 8 special day teachers at 33 Healthy Start elementary schools, as well as from focus groups conducted with special education teachers at 2 case study Healthy Start elementary schools.

California's Healthy Start school-linked services initiative is one of the largest efforts nationwide to improve results for children and families through community-generated, collaborative strategies for providing more comprehensive, integrated services linked to schools. Authorized by the Healthy Start Support Services for Children Act (SB 620), the initiative provides grants to local education agencies, working in collaboration with other public and private community organizations, to develop new or expand existing efforts to provide comprehensive, integrated, school-linked services. Administered by the California Department of Education as lead agency in a state-level collaborative of state agencies and the Foundation Consortium for School-linked Services, 3-year operational grants of up to $400,000 are awarded to successful applicants to support implementation of the comprehensive strategies developed through collaboration.

The underlying premise of Healthy Start is that local communities are best able to design effective strategies for meeting the needs of their children and families. Therefore, no single model of Healthy Start is defined in state law or regulations. Rather, local collaboratives develop individual approaches. Comprehensive strategies can involve elementary or secondary schools or both; they can concentrate on a single school, a cluster of schools, or all schools in a county. Some local initiatives center around school-based or school-linked health clinics as a way to bring health and mental health services to students. Others emphasize encouraging positive parenting skills, parental involvement in school activities, and parental support of educational activities at home. Goals of local initiatives vary widely and include meeting the educational, health, mental health, family functioning, employment, and basic household needs of students and families.

Healthy Start grant funds have gone to schools that represent all levels and enrollment sizes and different types of geographic areas within California. Despite this diversity, however, most of the students and families at Healthy Start schools have serious and multiple needs, as implied by their high poverty, low English proficiency and high academic needs.

This paper highlights elementary special education teacher involvement with and perceptions of school-linked services programs. The findings are summarized here according to the questions that guided the research.

Summary of Findings

1. **To what extent are special education teachers at Healthy Start affiliated schools informed about and involved in school-linked services? Were special educators included in the planning process? Were disability issues given any special consideration?**

    - Most of the special education teachers were aware of the school-linked services program associated with their school, although 12% were not aware of the program and another 15% were only somewhat aware. Although a few teachers learned about the program informally, through discussions with other teachers or administrators, most had attended formal orientations and inservice staff meetings focusing on the school-linked services program.

    - Few special education teachers (20%) had been involved in the planning process for the school-linked services program associated with their school. Special education teacher involvement in planning ranged from completing a survey focusing on the school's problems to helping write the Healthy Start grant application.

    - Most of the special education teachers that were involved in the SLS planning process felt that disability issues were given special consideration during the planning and implementation process.

    - Teachers who usually talked with families about issues other than their child's academics were more likely to have been involved in the initial school-linked services planning than those who never discussed nonacademic issues with families.

2. **In what ways are special educators linked/not linked to school-linked services?**

- Special education teachers in 90% of the schools reported that students with disabilities were included in the activities of the SLS program.

- Almost 80% of the teachers had referred their students to the SLS program, for issues ranging from behavior problems, including conflict management and self-esteem; parenting issues; medical, dental, and vision needs; counseling; and assessments.

- Special education teachers reported that approximately a third of their students used the school-linked services programs, although this percentage ranged from 1% to 100%.

- Slightly more than 70% of the special education teachers had referred students' families to the SLS program. Families were referred for a range of issues, including parenting skills, economic needs, homelessness, counseling, health needs, and basic needs such as clothing and furniture.

- Special education teachers who didn't refer to the program either felt that they didn't know the program well enough or felt that the regular education teachers or school counselors should refer students to the SLS program.

- About 70% of the special education teachers knew staff at the SLS program. Frequency of interactions with SLS program staff varied widely, ranging from meeting once a year to meeting or talking daily.

- Although approximately three-quarters of the teachers received feedback from the SLS program after referring a student, rarely was there a formal process in place for this feedback to occur. Teachers usually received only oral feedback, and often the teacher needed to seek out the information from the SLS staff. More than half of the teachers who did receive feedback felt that the information they received was insufficient. Most would have preferred a formal written process that did not require teachers to initiate the request for information.

- Slightly more than half of the special education teachers had ever used the expertise of the SLS program staff. Teachers sought information from SLS program staff about a variety of issues, including health issues (especially related to students' taking medication for the disability), behavior and attendance issues, and concerns about child abuse issues.

- SLS staff attendance at IEP meetings was not the norm; only 41% of the teachers reported SLS program staff as ever having attended IEP meetings. Few special education teachers reported receiving any input from SLS staff during the IEP process. SLS involvement in the IEP process varied widely across schools, however, ranging from no input to a school where the director of the SLS program attended all IEP meetings.

3. **Does involvement vary by teacher characteristics (e.g., whether a resource or a special day teacher, length of time taught at the school)?**

- Three-quarters of the teachers were resource teachers and one-quarter special day classroom teachers. Special day classroom teachers, as compared with resource teachers, were more likely to:

  - Feel that nonacademic needs of their students were being met
  - Refer students to the SLS program
  - Feel that transitions into or out of special education programs are affected by the SLS program.

  - Have received feedback from SLS after referring a student
  - Have used the expertise of the SLS program staff
  - Report SLS staff attendance at IEP meetings.

  - Refer families to the SLS program
  - Speak with families frequently (daily or weekly)
  - Speak with families about nonacademic issues
  - Feel that families are involved in their children's education.

- Slightly more than half (52%) of the special education teachers had taught at their current school for 5 years or more. Special education teachers who had taught at the school for 5 years or more, as compared with those having taught at the school for less than 5 years, were more likely to:

  - Have referred a student to the SLS program
  - Feel that their students benefited from the SLS program
  - Feel that students' nonacademic needs were being met
  - Report special education transitions as being affected by SLS.

  - Feel informed about their school's SLS program
  - Have received feedback from the SLS program after referring a student
  - Know the staff at the SLS program
  - Have used the expertise of the SLS program staff
  - Report SLS staff attendance at IEP meetings

  - Feel that they were very aware of their students' family situations/needs/strengths
  - Have referred students' families to the SLS program
  - Speak with families frequently (daily or weekly)
  - Talk with families about issues other than their child's academic issues
  - Feel that families are involved in their children's education.

4. **What are the barriers/facilitators to inclusion of special education teachers in school-linked services? Are there any barriers or facilitators that are unique to serving children with disabilities and their families?**

- Most teachers felt that there were few hindrances to use of SLS program services by students with disabilities; the guidelines teachers received for referring special education students were usually the same as those for regular education students.

- Overall, teachers felt that the barriers to using the SLS program for students with disabilities were the same as those experienced by all students. Teachers cited several barriers experienced by students in both regular and special education, including parents who don't follow through, transportation, and limited available services (especially for case management).

- Only two teachers described problems that were unique to students with disabilities. One teacher reported that there was more paperwork involved in referring students for counseling services because of separate funding sources for special education students, and another reported that special education students were excluded from an after-school program because of busing issues and not enough trained staff.

5. **Does special education teacher involvement vary by whether the SLS program is located on or off the school campus?**

- SLS programs were either located primarily on the school's campus (on-site), with most of the services being provided on campus, or located outside of the school's campus (off-site), often at a community center or another school in the district; 56% of the SLS programs were located on-site and 44% off-site. Special education teachers who taught in schools with SLS programs that were located *on-site* were more likely than special education teachers at schools with SLS programs *off-site* to:

  - Be informed about the SLS program
  - Have been involved in the SLS planning process
  - Have received feedback from the SLS program staff after referring a student
  - Know SLS program staff
  - Have used the expertise of the SLS program staff
  - Report SLS program staff attendance at IEP meetings.

  - Feel that their job had changed because of the existence of the SLS program
  - Be willing to give up other resources to continue the SLS program when the Healthy Start program funding is gone.

- Report that students with disabilities were included in the SLS program
- Have referred their students to the SLS program
- Feel that their students benefited from the SLS program
- Feel that some of their students' nonacademic needs were being met.

- Speak more frequently with students' families
- Usually talk with families about issues other than their child's academic issues
- Report that they were interacting with families more than before SLS
- Have referred their students' families to the SLS program
- Feel aware of their students' family situations/needs/strengths.

6. **What are special education teachers' perceptions of the impact of school-linked services programs for their students? How does the availability of school-linked services affect the overall delivery of special education and related services? Has having a school-linked services program changed their job as a special education teacher? How have school-linked services programs changed teachers' relationship with their students' families?**

- More than 90% of the teachers felt that their students benefited from SLS, with 30% reporting a large benefit. Teachers felt that students benefited from access to various services, including family counseling, psychological counseling, parent education, medical and dental screenings and services, transportation, and after-school care. Teachers described SLS staff as acting as an extra advocate for students with disabilities and their families.

- Although teachers felt that their students benefited from SLS programs, more than two-thirds of the teachers described a wide range of nonacademic needs they felt were still either not, or only partially, being met.

- When teachers were asked which services were needed by their students but not available through the SLS program, counseling was most frequently cited as being not sufficiently available to meet the need. Teachers also named tutoring, reading instruction, after school and summer enrichment programs.

- Approximately one-third of the teachers felt that students' transitions into or out of special education programs were affected by the SLS program. One teacher described a drama component of the Healthy Start program where students in special education were mainstreamed. As a result of their participation in this program several students demonstrated their readiness to move to a less restrictive environment. Some SLS programs have provided services that helped students exit from special education, and also maintained support of the students after their exit from special education. By offering screenings attention

deficit disorder and for speech and vision impairments, other SLS programs were involved in the identification of students as needing special education services.

- More than half of the special education teachers felt that their job had changed because of the existence of the SLS program. Teachers described an increased awareness of, and more contact with, services for children's noneducational needs. They felt that both they and their students' families received support and expertise from SLS staff through a wide range of services, including medical and dental, counseling, translation, advocacy, and transportation. As one teacher answered, "[SLS] makes my job easier and quicker. Staff know the families and the children; they act as an advocate for the children and families." Another teacher explained, "They are a good resource for parents if the teacher hasn't got the answer."

- Although the majority felt that having SLS was valuable, 17% stated that their school's SLS program did not make much difference to them. It is important to remember that Healthy Start sites differed widely in the types of services available, how the programs were structured, and how well they were integrated into the schools.

  A good barometer of teachers' feelings about the value of their school's SLS would be whether they would be willing to give up other resources, such as staff development days, to continue the SLS program once Healthy Start funding ended. When asked about their willingness to give up other resources to be able to continue the SLS program, two-thirds of the special education teachers unequivocally replied "Yes".

- About 40% of the teachers described their interactions with families as being more frequent than before the SLS program. Teachers also perceived more interaction with families about nonacademic issues.

- Several special education teachers stressed the importance of providing an overall support system for parents since they felt that many of the parents also had disabilities.

- More than 90% of the teachers reported being aware of their students' family situations and needs and strengths; of that group, over 40% felt they were very aware. Only two teachers described themselves as not being at all aware.

- When teachers were asked what else would have to happen at their school to bring about significant improvement in student outcomes, they cited a wide range of areas that still needed improvement, including smaller class size; more parental involvement; more money for books, staff, supplies, and computers; and parenting skills classes. Yet many teachers continued to feel positive about the impact of the SLS program on their school. As one teacher described, "Many services are still needed, but we are able to now give parents hope. We can now offer assistance on things outside of school, often we can sit and talk with families, just being there for them."

Summary

Overall, these findings present a picture of special education teachers as being "linked" to their schools' school-linked services programs. The teachers were aware of available services and referred students and their families to the programs. They knew the SLS program staff, and many had used the expertise of these co-workers. They felt that their students benefited from access to services. The teachers felt that having the SLS was valuable; many were even willing to give up other resources to be able to continue the SLS program once Healthy Start funding ended.

The extent of teacher linkages to SLS varied by the length of time teaching at the school, and also by whether a teacher was a special day classroom teacher or a resource teacher. Not surprisingly, teachers who had been at their schools longer had forged stronger linkages with their SLS programs. Special day classroom teachers, when compared with resource teachers, also reported a stronger relationship with their SLS programs. Special day teachers were more likely to refer students and their families to the program, as well as to use the expertise of SLS staff, including having SLS staff attend IEP meetings. A possible explanation for their being more likely to refer students and families is that unlike resource teachers, special day classroom teachers spend most of the day with the same students. They also reported a closer relationship with families; speaking with families more frequently, and more often about nonacademic issues. The time they spent with students and their families provided a better opportunity to learn about students and students' family situations, needs, and strengths.

Although special education teachers reported fairly strong relationships with their schools' SLS programs overall, there were still areas for improving SLS programs linkages to special education. SLS staff involvement in the IEP process is an infrequent occurrence, although many SLS staff have expertise that might directly benefit the process. Two-thirds of the teachers did not feel that students' transitions into and out of special education were affected by SLS. Teachers were also unhappy with the feedback they received from the SLS program once students had been referred to the program. Teachers felt the feedback they received was insufficient. They would have preferred a formal written process for feedback, not one that depended on the teacher to seek the information. Another opportunity for strengthening the SLS programs was the availability of some types of services . Although teachers reported many services as being available, they still reported several services as not being sufficiently available to meet the need, with counseling being most frequently cited.

The location of the SLS program is clearly very important to the integration of the program into the life of the school. Teachers who taught in schools where the services were located primarily on campus were much more closely linked to the SLS program than were teachers who taught in schools with programs that were off-site. Teachers who taught in schools with on-site programs were much more likely to be informed about the program, be involved in the planning, know the staff and use the expertise of the staff, report staff attendance at IEP meetings, have received feedback after referring a student, have referred students and their families to the program, feel that their students benefited from the SLS program, feel that their job has changed because of the SLS program, and be willing to give up other resources to continue the SLS program once funding has ended.

Finally, many of the issues special education teachers discussed did not appear to be unique to children with disabilities. Teachers reported few barriers to the use of SLS programs by students with disabilities. Overall, special education teachers felt that the barriers to using the SLS program for students with disabilities were the same as those experienced by all students. Regular education and special education teachers who participated in case study focus groups did not feel that the relationship of children with disabilities and their families to the SLS program could be distinguished from the experiences of other students at the school. Although students with disabilities nationwide are disproportionately poor and more likely to be members of minority groups than are children in the general population, students with disabilities did not appear to differ significantly from other students in Healthy Start schools, since many students and families at Healthy Start schools had serious and multiple needs, as implied by their high poverty and low English proficiency. To further explore whether and how the experiences of students with disabilities and their teachers differ from those of other students and teachers, additional research focusing on the experiences of both regular and special education teachers is necessary.

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